## **COUNTY OF SAN DIEGO VOLUNTEER REPORT FORM**

PERIOD: JULY 1, 2002 - JUNE 30, 2003

2002 790 -7 MH: 18

	DEPARTMENT/CO					i ju ku <b>br</b> jiji garfi.
	Department/Court:			Distric	ct Attorne	y ( ( )
	Division/Unit:			Victim	Assistance	e
	VOLUNTEER PRO	GRAM BEN	EFITS:			
a.	GENERAL VOLUNintern, groups, corp	•		should inclu	de commu	nity volunteer, stude
	No. Vol. 43	Hours //	3685	X	\$16.54	= \$60,949
Ту	pes of work performe	d by GENEF	RAL VOL	UNTEERS	in this cate	egory:
Re	viewing crime reports	s, input to ho	micide tr	acker datab	ase, and g	general clerical dutie
		-				
b.	INSTITUTIONAL Vo		•	ction should	d include c	ourt referrals, honor
w Perkula	camp inmates, PIC/		•	ction should	d include c	ourt referrals, honor ≟ \$0.00
	camp inmates, PIC/	RETC, GAIN	N, etc.) 0	×	\$16.54	<b>=</b> \$0.00
	camp inmates, PIC/	RETC, GAIN	N, etc.) 0	<b></b>	\$16.54	<b>=</b> \$0.00
	camp inmates, PIC/	RETC, GAIN	N, etc.) 0	<b></b>	\$16.54	<b>=</b> \$0.00
	camp inmates, PIC/ No. Vol. 0  Des of work performe  SPECIALIZED VOL  Volunteers in position attorney, physician,	Hours  d by INSTIT  UNTEERS ( ons requiring sports figure able comper	this section sections at the section section le	on should in skills and/o prity). Thesevels [VCL].	\$16.54 EERS in the clude utilizer expertisee expecializer of the control of the c	is category:  zation of Special elevels, for example, ed ve such a volunteer,
Tyı	camp inmates, PIC/ No. Vol. 9  Des of work performe  SPECIALIZED VOL  Volunteers in position attorney, physician, positions have verificate the please indicate the process of the process	Hours  Hours  d by INSTIT  UNTEERS ( ons requiring sports figure able comper position, hours	this section sections and control of the control of	on should in skills and/o prity). Thesevels [VCL]. ompensation	\$16.54 EERS in the clude utilizer expertisee expecializer of the control of the c	is category:  zation of Special elevels, for example, ed ve such a volunteer, ow.)
Tyı	camp inmates, PIC/ No. Vol. 9  Des of work performe  SPECIALIZED VOL  Volunteers in position attorney, physician, positions have verifi	Hours  d by INSTIT  UNTEERS ( ons requiring sports figure able comper	this section sections at the section section le	on should in skills and/o prity). Thesevels [VCL].	\$16.54 EERS in the clude utilizer expertisee expecializer of the control of the c	is category:  zation of Special elevels, for example, ed ve such a volunteer, ow.)  Dollar Benefit
Tyı	camp inmates, PIC/ No. Vol. 9  Des of work performe  SPECIALIZED VOL  Volunteers in position attorney, physician, positions have verificate the please indicate the process of the process	Hours  Hours  d by INSTIT  UNTEERS ( ons requiring sports figure able comper position, hours	this section sections and control of the control of	on should in skills and/o prity). Thesevels [VCL]. ompensation	\$16.54 EERS in the clude utilizer expertisee expecializer of the control of the c	is category:  zation of Special elevels, for example, ed ve such a volunteer, ow.)

	periormea b	y SPE	CIALIZED VOLUNTE	ERS in this category:	
d. TOTALS C	F DEPARTI	MENT	VOLUNTEERS (fron	n above):	-
No. of Vo	lunteers		Hours	Dollar Benefit	
43	3		3685	\$60,950	
0			0	\$0	
0			0	<u>\$0</u>	
TOTALS:	43	Tota	l Hours 3685	Total Value \$60	0,949.90
donations secti				Value:	
tem Donated:				Value:	
tem Donated:_			7	Value:	
tem Donated:_				Value:	
tem Donated:_				Value:	
			TOTAL	VALUE = \$0.00	
	ER PROGRA	AM C	OSTS:		
	•		· ·	s of direct supervision multip g program volunteers.)	olied by
Hours 3	368	X	25.28	\$9,393.04	
rate of coor	dinator[s]).	This s	ection should include	am coordination multiplied th coordination of staff, compi cement, recognition, etc.)	•
Hours 9	)2	X	25.28	\$2.325.76	

3.

4.

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	C.	Other program costs (training materials/supplies, r	ecognition costs, etc.):
		Item :	Cost:
		Item :	Cost:
		Item :	_ Cost:
		TOTAL OF OTHER PROGRAM COSTS =	\$0,00
	d.	TOTAL OF PROGRAM COST (4a+4b+4c) =	\$11,718.80
5.		NET BENEFIT TO DEPARTMENT FROM VOLUM	TEER PROGRAM:
	а	Total Dollar Benefits of Volunteers, Item 2d	\$60,949.90
	b.	Total of Donations to Volunteer Program, Item 3	\$0.00
	C.	Subtract Total of program Costs, Item 4d	\$11,718.80
		TOTAL PROGRAM BENEFIT:	\$49,231.10

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SPECIAL VOLUNTEER PR Please describe any special during the period of this repo	activities and/or achiever		
Karly Kevane was honored a	as our Volunteer of the Ye	ear	
District Attoreny Bonnie Dun	nanis presented our volur	nteers with c	ertificates of apprecia
	ım doals. Include activitie	es, number d	or volunteers, recruitm
training, recognition and othe	er goals:		2003-2004
training, recognition and othe	er goals:		2003-2004
training, recognition and othe	er goals:		2003-2004
training, recognition and othe	er goals:		2003-2004
training, recognition and other	er goals: ecognition events during		2003-2004
training, recognition and other	er goals: ecognition events during		2003-2004
training, recognition and other host at least two volunteer recognitions are least two volunteer recognitions.	er goals: ecognition events during	Fiscal Year	2003-2004
training, recognition and other host at least two volunteer regions of the second seco	er goals: ecognition events during	Fiscal Year	2003-2004  bob.hensley@sdcda
training, recognition and other host at least two volunteer recognition and other forms at least two volunteer recognitions.  GENERAL INFORMATION:  Name of person completing	er goals: ecognition events during report:  Bob He	nsley _E-Mail:	bob.hensley@sdcda
training, recognition and other host at least two volunteer recognition and other forms at least two volunteer recognitions.  GENERAL INFORMATION:  Name of person completing	er goals: ecognition events during report:  Bob He	Fiscal Year	bob.hensley@sdcda
Please describe your progra training, recognition and othe Host at least two volunteer re  GENERAL INFORMATION:  Name of person completing  531-4290  Volunteer Coordinator:  Phone:	er goals: ecognition events during report:  Bob He	nsleyE-Mail:Bob Hei	bob.hensley@sdcda
training, recognition and other host at least two volunteer recognition and other host at least two volunteer recognitions.  GENERAL INFORMATION:  Name of person completing  531-4290  Volunteer Coordinator:	er goals:  ecognition events during  report:  Mail Stop: D410	nsleyE-Mail:Bob Hei	bob.hensley@sdcda
training, recognition and other Host at least two volunteer research two volunteer recognition and other two volunteer recognitions are recognition and other two volunteer recognitions are recognition and other two volunteer recognitions are recognitions and other two volunteer recognitions are recognitions are recognitionally as a second recognition and the recognition are recognitions are recognitionally as a second recognition and recognitions are recognitionally as a second recognition and recognition are	er goals: ecognition events during report:  Mail Stop: D410  Mail Stop:	nsleyE-Mail:Bob Hei	bob.hensley@sdcda